

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known): _____ Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Stephanie _____ First Name R _____ Middle Name Andree _____ Last Name _____ Suffix (Sr., Jr., II, III)	_____ First Name _____ Middle Name _____ Last Name _____ Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	Stephanie _____ First Name _____ Middle Name Dodovich _____ Last Name _____ _____ Stephanie _____ First Name R _____ Middle Name Andree _____ Last Name	_____ First Name _____ Middle Name _____ Last Name _____ _____ First Name _____ Middle Name _____ Last Name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>4</u> <u>5</u> <u>7</u> <u>1</u> OR 9xx - xx - _____	xxx - xx - _____ OR 9xx - xx - _____

Debtor 1 Stephanie R Andree Case number (if known) _____

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	<input checked="" type="checkbox"/> I have not used any business names or EINs. _____ Business name _____ Business name _____ Business name _____ EIN _____ EIN	<input type="checkbox"/> I have not used any business names or EINs. _____ Business name _____ Business name _____ Business name _____ EIN _____ EIN
5. Where you live	1782 County Knoll Lane Number Street _____ _____ Elgin IL 60123 City State ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. _____ Number Street _____ P.O. Box _____ City State ZIP Code	If Debtor 2 lives at a different address: _____ Number Street _____ _____ _____ City State ZIP Code If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. _____ Number Street _____ P.O. Box _____ City State ZIP Code
6. Why you are choosing this district to file for bankruptcy	<i>Check one:</i> <input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. <input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)	<i>Check one:</i> <input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. <input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under	<i>Check one:</i> (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13
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Debtor 1 Stephanie R Andree Case number (if known) _____

8. How you will pay the fee ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
9. Have you filed for bankruptcy within the last 8 years? ☒ No
- ☐ Yes.
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? ☒ No
- ☐ Yes.
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
- Debtor _____ Relationship to you _____
- District _____ When _____ Case number, _____
MM / DD / YYYY if known
11. Do you rent your residence? ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?
- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Name of business, if any _____

Number _____ Street _____

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

City _____ State _____ ZIP Code _____

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?
- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Debtor 1 **Stephanie R Andree**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.
- 16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
-
- 17. Are you filing under Chapter 7?**
- ☐ No. I am not filing under Chapter 7. Go to line 18.
- ☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☒ No
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
- 19. How much do you estimate your assets to be worth?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
- 20. How much do you estimate your liabilities to be?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Stephanie R Andree _____

Stephanie R Andree, Debtor 1

Executed on 05/09/2018

MM / DD / YYYY

X _____

Signature of Debtor 2

Executed on _____

MM / DD / YYYY

Debtor 1 Stephanie R Andree Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X /s/ Salvador J Lopez Date **05/09/2018**
Signature of Attorney for Debtor MM / DD / YYYY

Salvador J Lopez
Printed name

Robson & Lopez LLC
Firm Name

180 W. Washington
Number Street

Suite 700

Chicago
City

IL
State

60602
ZIP Code

Contact phone **(312) 523-2021**

Email address **lopez@robsonlopez.com**

6298522
Bar number

State

Fill in this information to identify your case and this filing:

Debtor 1	Stephanie	R	Andree
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1.

1782 Country Knoll

Street address, if available, or other description

Elgin	IL	60123
City	State	ZIP Code

Kane
County

Single family home
Debtor's primary family residence.
Value based on CMA Report. Debtor's
half of equity equal to 10,192.79.

What is the property?

Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 06-15-151-002

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$185,672.00	\$185,672.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

One half fee simple

☐ Check if this is community property
(see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$185,672.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

Debtor 1 Stephanie R Andree Case number (if known) _____

3.1. **Who has an interest in the property?** Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Make: Cadillac Check one.
 Model: SRX ☒ Debtor 1 only
 Year: 2006 ☐ Debtor 2 only
 Approximate mileage: 100,000 ☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another \$3,629.00 \$3,629.00

Other information: ☐ Check if this is community property (see instructions)

2006 Cadillac SRX (approx. 100,000 miles). In need of work. Kelly Blue Book Value.

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories
- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → **\$3,629.00**

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items? **Current value of the portion you own?**
 Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**
Examples: Major appliances, furniture, linens, china, kitchenware

☐ No
☒ Yes. Describe..... **Couches, bedroom set, crib and children's furniture, Kitchen appliances. Total resale value 2000.** \$1,000.00

7. **Electronics**
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No
☒ Yes. Describe..... **Debtor's cell phone. 2 household tvs.** \$150.00

8. **Collectibles of value**
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No
☐ Yes. Describe..... _____

9. **Equipment for sports and hobbies**
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No
☐ Yes. Describe..... _____

10. **Firearms**
Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No
☐ Yes. Describe..... _____

11. **Clothes**
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No
☒ Yes. Describe..... **Debtor's clothes and shoes.** \$300.00

Debtor 1 **Stephanie R Andree** Case number (if known) _____

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe..... **Wedding ring.**

\$500.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

☒ Yes. Describe..... **2 family dogs.**

\$50.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....



\$2,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes..... Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes..... Institution name:

17.1. Checking account: **Citibank Checking account**

\$600.00

17.2. Savings account: **Citibank Savings account**

\$1,000.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Debtor 1 Stephanie R Andree Case number (if known) _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them..... Issuer name: _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No
☐ Yes. List each account separately. Type of account: _____ Institution name: _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes..... Institution name or individual: _____

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes..... Issuer name and description: _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them _____

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____
State: _____
Local: _____

Debtor 1 Stephanie R Andree Case number (if known) _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information

Alimony: _____
Maintenance: _____
Support: _____
Divorce settlement: _____
Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

- ☒ No
☐ Yes. Give specific information _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☐ No
☒ Yes. Describe each claim..... **See continuation page(s).**

\$4,000.00

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....



\$5,600.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Debtor 1 Stephanie R Andree Case number (if known) _____

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☒ No
☐ Yes. Describe... _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
☐ Yes. Describe... _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe... _____

41. Inventory

- ☒ No
☐ Yes. Describe... _____

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe..... Name of entity: _____ % of ownership: _____

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?
☐ No
☐ Yes. Describe..... _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes.... _____

Debtor 1 Stephanie R Andree Case number (if known) _____

48. Crops--either growing or harvested

- ☒ No
☐ Yes. Give specific information..... _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.... _____

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.... _____

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific information..... _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → **\$0.00**

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → **\$0.00**

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → **\$185,672.00**

56. Part 2: Total vehicles, line 5 \$3,629.00

57. Part 3: Total personal and household items, line 15 \$2,000.00

58. Part 4: Total financial assets, line 36 \$5,600.00

59. Part 5: Total business-related property, line 45 \$0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 +\$0.00

62. Total personal property. Add lines 56 through 61..... \$11,229.00 Copy personal property total → **+\$11,229.00**

63. Total of all property on Schedule A/B. Add line 55 + line 62..... **\$196,901.00**

Debtor 1 Stephanie R Andree Case number (if known) _____

34. Other contingent and unliquidated claims of every nature (details):

Potential FDCPA claim vs. RGS. Unfiled. Statutory damages of 1000 plus costs and attorneys fees.	<u>\$1,000.00</u>
Potential FDCPA claim against Financial Recovery Services. Unfiled. Statutory damages of 1000 plus costs and attorney's fees.	<u>\$1,000.00</u>
Potential FDCPA Claim against GC Services. Unfiled. Statutory damages of 1000 plus costs and attorney's fees.	<u>\$1,000.00</u>
Potential FDCPA claim against Phillips Cohen & Assoc. Unfiled. Statutory damages of 1000 plus costs and attorney's fees.	<u>\$1,000.00</u>

Fill in this information to identify your case:

Debtor 1	Stephanie	R	Andree
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Single family home Debtor's primary family residence. Value based on CMA Report. Debtor's half of equity equal to 10,192.79. Parcel: 06-15-151-002 Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$185,672.00</u>	<input checked="" type="checkbox"/> <u>\$15,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
Brief description: 2006 Cadillac SRX (approx. 100000 miles) 2006 Cadillac SRX (approx. 100,000 miles). In need of work. Kelly Blue Book Value. Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$3,629.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **Stephanie R Andree** Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Couches, bedroom set, crib and children's furniture, Kitchen appliances. Total resale value 2000. Line from Schedule A/B: <u>6</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Debtor's cell phone. 2 household tvs. Line from Schedule A/B: <u>7</u>	<u>\$150.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Debtor's clothes and shoes. Line from Schedule A/B: <u>11</u>	<u>\$300.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description: Wedding ring. (1st exemption claimed for this asset) Line from Schedule A/B: <u>12</u>	<u>\$500.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief description: Wedding ring. (2nd exemption claimed for this asset) Line from Schedule A/B: <u>12</u>	<u>\$500.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: 2 family dogs. Line from Schedule A/B: <u>13</u>	<u>\$50.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Citibank Checking account Line from Schedule A/B: <u>17.1</u>	<u>\$600.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Citibank Savings account Line from Schedule A/B: <u>17.2</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Potential FDCPA claim vs. RGS. Unfiled. Statutory damages of 1000 plus costs and attorneys fees. Line from Schedule A/B: <u>34</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Potential FDCPA claim against Financial Recovery Services. Unfiled. Statutory damages of 1000 plus costs and attorney's fees. Line from <i>Schedule A/B</i> : <u>34</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Potential FDCPA Claim against GC Services. Unfiled. Statutory damages of 1000 plus costs and attorney's fees. Line from <i>Schedule A/B</i> : <u>34</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Potential FDCPA claim against Phillips Cohen & Assoc. Unfiled. Statutory damages of 1000 plus costs and attorney's fees. Line from <i>Schedule A/B</i> : <u>34</u>	<u>\$1,000.00</u>	<input type="checkbox"/> _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Fill in this information to identify your case:

Debtor 1 Stephanie R Andree
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number
 (if known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim
 Do not deduct the value of collateral

Column B
Value of collateral that supports this claim

Column C
Unsecured portion
 If any

2.1

Wells Fargo Home Mortgage
Creditor's name
PO Box 10335
Number Street

Describe the property that secures the claim:
1782 Country Knoll Lane,
Elgin, IL

\$165,286.43

\$185,672.00

Des Moines IA 50306-0335
City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset)

Home Mortgage

Date debt was incurred 7/2010 Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here:

\$165,286.43

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$165,286.43

page 1

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

\$3,007.32

4.1

Advanced Medical & Wellness

Nonpriority Creditor's Name

1600 North Randall Rd Suite 100

Number Street

Elgin

City

IL

State

60123

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.2

Amex

Nonpriority Creditor's Name

Correspondence

Number Street

PO Box 981540

El Paso

City

TX

State

79998

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 0 0 5

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Treatment

Last 4 digits of account number 0 0 6 3

When was the debt incurred? 07/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$742.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$2,809.01

4.3

Ashton Center for Surgery

Nonpriority Creditor's Name

1800 McDonough Rd

Number Street

Last 4 digits of account number 1 8 3 0

When was the debt incurred? 7/1/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Hoffman Estates IL 60192

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Treatment

4.4

Atg Credit Llc

Nonpriority Creditor's Name

1700 W Cortland St

Number Street

Ste 2

Last 4 digits of account number 8 5 7 4

When was the debt incurred? 09/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Chicago IL 60622

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collection Attorney

\$423.00

4.5

Atg Credit Llc

Nonpriority Creditor's Name

1700 W Cortland St

Number Street

Ste 2

Last 4 digits of account number 2 0 0 2

When was the debt incurred? 01/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Chicago IL 60622

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collection Attorney

\$318.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$423.00

4.6

ATG Credit LLC

Nonpriority Creditor's Name

PO Box 14895

Number Street

Chicago

IL

60614-4895

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 4 7 2

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - Suburban Orthopaedics

\$264.96

4.7

Cadence Health

Nonpriority Creditor's Name

25 North Winfield Rd

Number Street

Winfield

IL

60190

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 5 7 5

When was the debt incurred? 9/28/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - Central Dupage Hospital

\$6,607.00

4.8

Capital One

Nonpriority Creditor's Name

Attn: General Correspondence/Bankruptcy

Number Street

PO Box 30285

Salt Lake City

UT

84130

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 4 6 8

When was the debt incurred? 06/2010

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$3,264.00

4.9

Cardworks/CW Nexus

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 9201

Old Bethpage

NY 11804

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 7 3 9

When was the debt incurred? 08/2011

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

4.10

Chase Card Services

Nonpriority Creditor's Name

Attn: Correspondence Dept

Number Street

PO Box 15298

Wilmington

DE 19850

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 5 3 8

When was the debt incurred? 04/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$1,491.00

4.11

Choice Recovery Inc

Nonpriority Creditor's Name

1550 Old Henderson Rd Ste 100

Number Street

Columbus

OH 43220

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 5 3 9 7

When was the debt incurred? 04/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collection Attorney

\$213.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$793.00

4.12

Discover Financial

Nonpriority Creditor's Name

PO Box 3025

Number Street

New Albany

OH 43054

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 5 1 9

When was the debt incurred? 05/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

4.13

First National Credit Card/Legacy

Nonpriority Creditor's Name

First National Credit Card

Number Street

PO Box 5097

Sioux Falls

SD 51117

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 6 6 9

When was the debt incurred? 12/2010

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$1,514.00

4.14

ICS Collection Serv

Nonpriority Creditor's Name

PO Box 1010

Number Street

Tinley Park

IL 60477-9110

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4 8 1 9

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - S. Ardent

\$277.49

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$307.80

4.15

ICS Collection Serv

Nonpriority Creditor's Name

PO Box 1010

Number Street

Tinley Park

IL

60477-9110

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 8 8 1

When was the debt incurred? 8/31/15

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - Pediatric Faculty Foundation

\$2,441.96

4.16

JH Portfolio Debt Equities

Nonpriority Creditor's Name

500 Virginia Dr. Suit 514

Number Street

Ft. Washington

PA

19034

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 7 9 4

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Credit Card

\$3,550.00

4.17

Jn Portfolio Debt Equities, LLC

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

5757 Phantom Dr. STE 225

Hazelwood

MO

63042

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4 4 3 7

When was the debt incurred? 02/2017

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Factoring Company Account

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$1,636.00

4.18

Jn Portfolio Debt Equities, LLC

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

5757 Phantom Dr. STE 225

Hazelwood

MO

63042

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 9 9 4

When was the debt incurred? 12/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Factoring Company Account

4.19

Kohls/Capital One

Nonpriority Creditor's Name

Kohls Credit

Number Street

PO Box 3120

Milwaukee

WI

53201

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 6 3 7 5

When was the debt incurred? 04/2013

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Charge Account

\$513.00

4.20

Midland Funding

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 939069

San Diego

CA

92193

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 8 2 0

When was the debt incurred? 12/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Factoring Company Account

\$1,328.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$336.00

4.21

Oak Brook Anesthesiologists

Nonpriority Creditor's Name

PO Box 7628

Number Street

Carol Stream

IL

60197

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.22

Portfolio Recovery

Nonpriority Creditor's Name

PO Box 41067

Number Street

Norfolk

VA

23541

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

The Home Depot Card

Last 4 digits of account number 1 8 3 0

When was the debt incurred? 12/20/2016

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical Treatment

Last 4 digits of account number 5 1 3 4

When was the debt incurred? 06/29/2017

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Factoring Company Account

\$2,470.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$1,947.00

4.23

Portfolio Recovery

Nonpriority Creditor's Name

PO Box 41067

Number Street

Norfolk

VA 23541

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 5 6 1

When was the debt incurred? 10/21/2017

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Factoring Company Account

4.24

Presence

Nonpriority Creditor's Name

Bankruptcy Dept.

Number Street

PO Box 247

Bedford Park

IL 60499

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8 6 7 9

When was the debt incurred? Varous

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medial Treatment

\$3,066.39

4.25

State Collection Service Inc

Nonpriority Creditor's Name

2509 S. Stoughton Rd

Number Street

Madison

WI 53716

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4 4 4 9

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - Northwestern Hospital

\$530.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$3,429.45

4.26

State Collection Service Inc

Nonpriority Creditor's Name
2509 S. Stoughton Rd
Number Street

Madison WI 53716
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 7 6 3 8

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Collecting for - Northwestern Hospital

4.27

Synco/Toys R Us

Nonpriority Creditor's Name
Attn: Bankruptcy
Number Street
PO Box 965060

Orlando FL 32896
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 5 8 4 8

When was the debt incurred? 07/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Charge Account

\$2,708.00

4.28

Target

Nonpriority Creditor's Name
Target Card Services
Number Street
Mail Stop NCB-0461

Minneapolis MN 55440
City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 4 5 1 5

When was the debt incurred? 11/2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

\$572.00

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.29

\$363.16

Transworld Systems

Nonpriority Creditor's Name
500 Virginia Dr. Suite 514

Number Street

Ft. Washington PA 19044

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 9 4 9 4

When was the debt incurred? various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - ATI Physical Therapy

4.30

\$60.00

Transworld Systems Inc.

Nonpriority Creditor's Name
500 Virginia Drive.

Number Street

Suite 514

Ft. Washington PA 19034

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 8 5 0

When was the debt incurred? Various

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Collecting for - Advance Midwest Medical

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Alltran Financial On which entry in Part 1 or Part 2 did you list the original creditor?
 Name
PO Box 610 Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
 Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Sauk Rapids **MN** **56379** Last 4 digits of account number 7 1 0 8
 City State ZIP Code

Alltran Financial On which entry in Part 1 or Part 2 did you list the original creditor?
 Name
PO Box 610 Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
 Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims
Sauk Rapids, MN

56379 Last 4 digits of account number 7 1 0 8
 City State ZIP Code

Alltran Financial On which entry in Part 1 or Part 2 did you list the original creditor?
 Name
PO Box 610 Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
 Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Sauk Rapids **MN** **56379** Last 4 digits of account number 3 3 7 0
 City State ZIP Code

Blitt & Gaines PC On which entry in Part 1 or Part 2 did you list the original creditor?
 Name
661 Glenn Avenue Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
 Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims

Wheeling **IL** **60090** Last 4 digits of account number 4 8 8 2
 City State ZIP Code

CAC Financial On which entry in Part 1 or Part 2 did you list the original creditor?
 Name
2601 NW Expressway Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
 Number Street ☒ Part 2: Creditors with Nonpriority Unsecured Claims
Suite 1000 East

Oklahoma City **OK** **73112-7236** Last 4 digits of account number 2 4 2 4
 City State ZIP Code

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Capital Management Services LP

Name

698 1/2 South Ogden St.

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 7 6 5

Buffalo

NY

14206-2317

City

State

ZIP Code

Client Services

Name

3451 Harry S Truman Blvd

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 2 1 1

Saint Charles

MO

63301-4047

City

State

ZIP Code

Client Services

Name

3451 Harry S Truman Blvd

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 6 4 3

Saint Charles

MO

63301-4047

City

State

ZIP Code

Convergent

Name

800 SW 39th St.

Number Street

PO Box 9004

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 7 7 8

Renton

WA

98057

City

State

ZIP Code

ERC

Name

PO Box 57610

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3 9 7 3

Jacksonville

FL

32241

City

State

ZIP Code

FBCS Services

Name

330 S. Warminster Rd.

Number Street

Suite 353

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 3 0 1

Hatboro

PA

19040

City

State

ZIP Code

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Financial Recovery Services

Name
PO Box 385908
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Minneapolis **MN** **55438-5908**
City State ZIP Code

Last 4 digits of account number T 4 0 6

Firstsource

Name
205 Bryant Woods South
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Amherst **NY** **14228**
City State ZIP Code

Last 4 digits of account number 4 8 7 3

Firstsource

Name
205 Bryant Woods South
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Amherst **NY** **14228**
City State ZIP Code

Last 4 digits of account number 2 9 6 2

FMA Alliance

Name
12339 Cutten Rd
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Houston **TX** **77066**
City State ZIP Code

Last 4 digits of account number 7 9 1 5

Frontline Asset Strategies

Name
2700 Snelling Ave N
Number Street
Ste 250

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Roseville **MN** **55113**
City State ZIP Code

Last 4 digits of account number 1 6 0 8

GC Services Limited Partnership

Name
PO Box 930824
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Wixom **MI** **48393-0824**
City State ZIP Code

Last 4 digits of account number 0 7 8 5

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Global Credit Collections

Name
5440 N. Cumberland Ave.
Number Street
Suite 300

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Chicago **IL** **60656-1490**
City State ZIP Code

Last 4 digits of account number 1 5 8 6

LTD Financial Services

Name
7322 Southwest Freeway
Number Street
Suite 1600

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Houston **TX** **77074-2053**
City State ZIP Code

Last 4 digits of account number 0 1 3 8

Mercantile

Name
165 Lawrence Bell Drive
Number Street
Suite 100

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Williamsville **NY** **14221-1900**
City State ZIP Code

Last 4 digits of account number 3 8 7 1

MRS

Name
1930 Olney Ave.
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Cherry Hill **NJ** **08003**
City State ZIP Code

Last 4 digits of account number 2 6 7 4

Nationwide Credit

Name
PO Box 14581
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Des Moines **IA** **50606-3581**
City State ZIP Code

Last 4 digits of account number 9 9 7 8

Northland Group

Name
PO Box 390846
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Minneapolis **MN** **55439**
City State ZIP Code

Last 4 digits of account number 0 6 0 6

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

Phillips & Cohen Associates Ltd

Name

1002 Justison Street

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 4 2 6

Wilmington

DE

19801-5148

City

State

ZIP Code

Progressive Financial Services, Inc

Name

1919 West Fairmont Dr.

Number Street

Building 8

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7 4 8 6

Tempe

AZ

85282

City

State

ZIP Code

RGS

Name

1700 Jay Ell Dr.

Number Street

Ste 200

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 2 0 4 1

Richardson

TX

75081

City

State

ZIP Code

Transworld Systems Inc.

Name

500 Virginia Drive.

Number Street

Suite 514

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1 8 8 8

Ft. Washington

PA

19034

City

State

ZIP Code

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$47,405.54</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$47,405.54</u>

Fill in this information to identify your case:

Debtor 1	<u>Stephanie</u>	<u>R</u>	<u>Andree</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this information to identify your case:

Debtor 1 Stephanie R Andree
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number
(if known) _____

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☒ Yes

In which community state or territory did you live? _____ Fill in the name and current address of that person.

Neil A Andree

Name of your spouse, former spouse, or legal equivalent

1782 County Knoll Lane

Number Street

Elgin

City

IL

State

60123

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Andree, Neil A

Name

1782 County Knoll Lane

Number Street

Elgin

City

IL

State

60123

ZIP Code

☒ Schedule D, line **2.1**

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Wells Fargo Home Mortgage

Fill in this information to identify your case:

Debtor 1	Stephanie	R	Andree
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☐ Employed
☒ Not employed

Unemployed

Number Street

City State Zip Code

Debtor 2 or non-filing spouse

- ☒ Employed
☐ Not employed

Manager

Mattress Firm

Number Street

City State Zip Code

How long employed there?

3 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$0.00	\$6,827.82
3. Estimate and list monthly overtime pay.	3. + \$0.00	\$0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$0.00	\$6,827.82

Debtor 1 **Stephanie R Andree**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$0.00	\$6,827.82
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$0.00	\$1,094.18
5b. Mandatory contributions for retirement plans	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	\$0.00	\$0.00
5e. Insurance	\$0.00	\$1,035.36
5f. Domestic support obligations	\$0.00	\$0.00
5g. Union dues	\$0.00	\$0.00
5h. Other deductions. Specify: _____	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$0.00	\$2,129.54
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$0.00	\$4,698.28
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$0.00	\$0.00
8b. Interest and dividends	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$0.00	\$0.00
8d. Unemployment compensation	\$0.00	\$0.00
8e. Social Security	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	\$0.00	\$0.00
8g. Pension or retirement income	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$0.00	\$4,698.28
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		\$4,698.28 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. None. <input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<u>Stephanie</u>	<u>R</u>	<u>Andree</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>		
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. **Does Debtor 2 live in a separate household?**
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
<u>Spouse</u>	_____	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
<u>Daughter</u>	<u>5</u>	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
<u>Daughter</u>	<u>2</u>	<input type="checkbox"/> No
		<input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
		<input type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No
		<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence.
Include first mortgage payments and any rent for the ground or lot.

4. \$1,492.87

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. _____

4b. _____

4c. \$250.00

4d. _____

Debtor 1 Stephanie R Andree

Case number (if known) _____

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$350.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$100.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$200.00</u>
6d. Other. Specify: <u>Cell phones</u>	6d.	<u>\$150.00</u>
7. Food and housekeeping supplies	7.	<u>\$600.00</u>
8. Childcare and children's education costs	8.	_____
9. Clothing, laundry, and dry cleaning	9.	<u>\$250.00</u>
10. Personal care products and services	10.	<u>\$150.00</u>
11. Medical and dental expenses	11.	<u>\$250.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$300.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$150.00</u>
14. Charitable contributions and religious donations	14.	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$200.00</u>
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	<u>\$331.00</u>
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 Stephanie R Andree

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: _____ 21. + _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a. <u>\$4,773.87</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$4,773.87</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <u>\$4,698.28</u>
23b. Copy your monthly expenses from line 22c above.	23b. - <u>\$4,773.87</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <u>(\$75.59)</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.
☐ Yes. Explain here:
None.

Fill in this information to identify your case:

Debtor 1 Stephanie R Andree
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number
 (if known) _____

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
 Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)
 - 1a. Copy line 55, Total real estate, from Schedule A/B..... **\$185,672.00**
 - 1b. Copy line 62, Total personal property, from Schedule A/B..... **\$11,229.00**
 - 1c. Copy line 63, Total of all property on Schedule A/B..... **\$196,901.00**

Part 2: Summarize Your Liabilities

Your liabilities
 Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)
 - 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$165,286.43**
 3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)
 - 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$0.00**
 - 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$47,405.54**
- Your total liabilities** **\$212,691.97**

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... **\$4,698.28**
5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... **\$4,773.87**

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$5,945.90

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Fill in this information to identify your case:

Debtor 1	<u>Stephanie</u>	<u>R</u>	<u>Andree</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Stephanie R Andree
Stephanie R Andree, Debtor 1

Date 05/09/2018
MM / DD / YYYY

X _____
Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	<u>Stephanie</u>	<u>R</u>	<u>Andree</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

- What is your current marital status?**
 - ☒ Married
 - ☐ Not married
- During the last 3 years, have you lived anywhere other than where you live now?**
 - ☒ No
 - ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
- Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 - ☐ No
 - ☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____
For the last calendar year: (January 1 to December 31, <u>2017</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____
For the calendar year before that: (January 1 to December 31, <u>2016</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

- ☐ No. Go to line 7.
- ☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
- ☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Wells Fargo Home Mortgage		\$4,500.00	\$165,000.00	<input checked="" type="checkbox"/> Mortgage
Creditor's name	3/1/18 to catch up on 3 months behind.			<input type="checkbox"/> Car
Number Street				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other _____
City State ZIP Code				

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No
- ☐ Yes. List all payments to an insider.

Debtor 1 Stephanie R Andree Case number (if known) _____

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title	Nature of the case	Court or agency	Status of the case
Capital One v. Stephanie Andree	Collection case.	Circuit Court of Kane County	<input type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input checked="" type="checkbox"/> Concluded
Case number <u>17-SC-004882</u>		City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>Robson & Lopez LLC</u>	<u>Attorney's fees for this case.</u>		
<u>180 W. Washington</u>		<u>05/09/2018</u>	<u>\$2,150.00</u>
<u>Suite 700</u>			
<u>Chicago</u> <u>IL</u> <u>60602</u>			
<small>City State ZIP Code</small>			

 Email or website address

 Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Stephanie R Andree Case number (if known) _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
☐ Yes. Fill in the details below.

Debtor 1 Stephanie R Andree Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Stephanie R Andree
Stephanie R Andree, Debtor 1

X _____
Signature of Debtor 2

Date 05/09/2018

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- **You are an individual filing for bankruptcy,**
and
- **Your debts are primarily consumer debts.**
Consumer debts are defined in 11 U.S.C. § 101(8)
as "incurred by an individual primarily for a
personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one
of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family
farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for
individuals with regular income

**You should have an attorney review your
decision to file for bankruptcy and the choice
of chapter.**

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	<hr/>	
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty
preventing them from paying their debts and who are
willing to allow their non-exempt property to be used to
pay their creditors. The primary purpose of filing under
chapter 7 is to have your debts discharged. The
bankruptcy discharge relieves you after bankruptcy from
having to pay many of your pre-bankruptcy debts.
Exceptions exist for particular debts, and liens on
property may still be enforced after discharge. For
example, a creditor may have the right to foreclose a
home mortgage or repossess an automobile.

However, if the court finds that you have committed
certain kinds of improper conduct described in the
Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and
you receive a discharge, some debts are not discharged
under the law. Therefore, you may still be responsible to
pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form--sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	<hr/>	
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together--called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)**

In re **Stephanie R Andree**

Case No. _____

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$2,150.00</u>
Prior to the filing of this statement I have received.....	<u>\$2,150.00</u>
Balance Due.....	<u>\$0.00</u>

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify)
Debtor's non-filing spouse.

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/09/2018

Date

/s/ Salvador J Lopez

Salvador J Lopez

Bar No. 6298522

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)**

IN RE: **Stephanie R Andree**

CASE NO

CHAPTER **7**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 5/9/2018

Signature /s/ Stephanie R Andree
Stephanie R Andree

Date _____

Signature _____

Advanced Medical & Wellness
1600 North Randall Rd Suite 100
Elgin, IL 60123

Capital Management Services LP
698 1/2 South Ogden St.
Buffalo, NY 14206-2317

Financial Recovery Services
PO Box 385908
Minneapolis, MN 55438-5908

Alltran Financial
PO Box 610
Sauk Rapids, MN 56379

Capital One
Attn: General Correspondence/Ba
PO Box 30285
Salt Lake City, UT 84130

First National Credit Card/Lega
First National Credit Card
PO Box 5097
Sioux Falls, SD 57117

Alltran Financial
PO Box 610
Sauk Rapids, MN
56379

Cardworks/CW Nexus
Attn: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

Firstsource
205 Bryant Woods South
Amherst, NY 14228

Amex
Correspondence
PO Box 981540
El Paso, TX 79998

Chase Card Services
Attn: Correspondence Dept
PO Box 15298
Wilmington, DE 19850

FMA Alliance
12339 Cutten Rd
Houston, TX 77066

Ashton Center for Surgery
1800 Mcdonough Rd
Hoffman Estates, IL 60192

Choice Recovery Inc
1550 Old Henderson Rd Ste 100
Columbus, OH 43220

Frontline Asset Strategies
2700 Snelling Ave N
Ste 250
Roseville, MN 55113

Atg Credit Llc
1700 W Cortland St
Ste 2
Chicago, IL 60622

Client Services
3451 Harry S Truman Blvd
Saint Charles, MO 63301-4047

GC Services Limited Partnership
PO Box 930824
Wixom, MI 48393-0824

ATG Credit LLC
PO Box 14895
Chicago, IL 60614-4895

Convergent
800 SW 39th St.
PO Box 9004
Renton, WA 98057

Global Credit Collections
5440 N. Cumberland Ave.
Suite 300
Chicago, IL 60656-1490

Blitt & Gaines PC
661 Glenn Avenue
Wheeling, IL 60090

Discover Financial
PO Box 3025
New Albany, OH 43054

ICS Collection Serv
PO Box 1010
Tinley Park, IL 60477-9110

CAC Financial
2601 NW Expressway
Suite 1000 East
Oklahoma City, OK 73112-7236

ERC
PO Box 57610
Jacksonville, FL 32241

JH Portfolio Debt Equities
500 Virginia Dr. Suit 514
Ft. Washington, PA 19034

Cadence Health
25 North Winfield Rd
Winfield, IL 60190

FBCS Services
330 S. Warminster Rd.
Suite 353
Hatboro, PA 19040

Jn Portfolio Debt Equities, LLC
Attn: Bankruptcy
5757 Phantom Dr. STE 225
Hazelwood, MO 63042

Kohls/Capital One
Kohls Credit
PO Box 3120
Milwaukee, WI 53201

Portfolio Recovery
PO Box 41067
Norfolk, VA 23541

LTD Financial Services
7322 Southwest Freeway
Suite 1600
Houston, TX 77074-2053

Presence
Bankruptcy Dept.
PO Box 247
Bedford Park, IL 60499

Mercantile
165 Lawrence Bell Drive
Suite 100
Williamsville, NY 14221-1900

Progressive Financial Services,
1919 West Fairmont Dr.
Building 8
Tempe, AZ 85282

Midland Funding
Attn: Bankruptcy
PO Box 939069
San Diego, CA 92193

RGS
1700 Jay Ell Dr.
Ste 200
Richardson, TX 75081

MRS
1930 Olney Ave.
Cherry Hill, NJ 08003

State Collection Service Inc
2509 S. Stoughton Rd
Madison, WI 53716

Nationwide Credit
PO Box 14581
Des Moines, IA 50606-3581

Syncb/Toys R Us
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Neil A Andree
1782 County Knoll Lane
Elgin, IL 60123

Target
Target Card Services
Mail Stop NCB-0461
Minneapolis, MN 55440

Northland Group
PO Box 390846
Minneapolis, MN 55439

Transworld Systems
500 Virginia Dr. Suite 514
Ft. Washington, PA 19044

Oak Brook Anesthesiologists
PO Box 7628
Carol Stream, IL 60197

Transworld Systems Inc.
500 Virginia Drive.
Suite 514
Ft. Washington, PA 19034

Phillips & Cohen Associates ltd
1002 Justison Street
Wilmington, DE 19801-5148

Wells Fargo Home Mortgage
PO Box 10335
Des Moines, IA 50306-0335

Advanced Medical & Wellness
1600 North Randall Rd Suite
100
Elgin, IL 60123

Capital Management Services LP
698 1/2 South Ogden St.
Buffalo, NY 14206-2317

Financial Recovery Services
PO Box 385908
Minneapolis, MN 55438-5908

Alltran Financial
PO Box 610
Sauk Rapids, MN 56379

Capital One
Attn: General
Correspondence/Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

First National Credit
Card/Legacy
First National Credit Card
PO Box 5097
Sioux Falls, SD 57117

Alltran Financial
PO Box 610
Sauk Rapids, MN
56379

Cardworks/CW Nexus
Attn: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

Firstsource
205 Bryant Woods South
Amherst, NY 14228

Amex
Correspondence
PO Box 981540
El Paso, TX 79998

Chase Card Services
Attn: Correspondence Dept
PO Box 15298
Wilmington, DE 19850

FMA Alliance
12339 Cutten Rd
Houston, TX 77066

Ashton Center for Surgery
1800 McDonough Rd
Hoffman Estates, IL 60192

Choice Recovery Inc
1550 Old Henderson Rd Ste 100
Columbus, OH 43220

Frontline Asset Strategies
2700 Snelling Ave N
Ste 250
Roseville, MN 55113

Atg Credit Llc
1700 W Cortland St
Ste 2
Chicago, IL 60622

Client Services
3451 Harry S Truman Blvd
Saint Charles, MO 63301-4047

GC Services Limited
Partnership
PO Box 930824
Wixom, MI 48393-0824

ATG Credit LLC
PO Box 14895
Chicago, IL 60614-4895

Convergent
800 SW 39th St.
PO Box 9004
Renton, WA 98057

Global Credit Collections
5440 N. Cumberland Ave.
Suite 300
Chicago, IL 60656-1490

Blitt & Gaines PC
661 Glenn Avenue
Wheeling, IL 60090

Discover Financial
PO Box 3025
New Albany, OH 43054

ICS Collection Serv
PO Box 1010
Tinley Park, IL 60477-9110

CAC Financial
2601 NW Expressway
Suite 1000 East
Oklahoma City, OK 73112-7236

ERC
PO Box 57610
Jacksonville, FL 32241

JH Portfolio Debt Equities
500 Virginia Dr. Suit 514
Ft. Washington, PA 19034

Cadence Health
25 North Winfield Rd
Winfield, IL 60190

FBCS Services
330 S. Warminster Rd.
Suite 353
Hatboro, PA 19040

Jn Portfolio Debt Equities,
LLC
Attn: Bankruptcy
5757 Phantom Dr. STE 225
Hazelwood, MO 63042

Kohls/Capital One
Kohls Credit
PO Box 3120
Milwaukee, WI 53201

Portfolio Recovery
PO Box 41067
Norfolk, VA 23541

LTD Financial Services
7322 Southwest Freeway
Suite 1600
Houston, TX 77074-2053

Presence
Bankruptcy Dept.
PO Box 247
Bedford Park, IL 60499

Mercantile
165 Lawrence Bell Drive
Suite 100
Williamsville, NY 14221-1900

Progressive Financial
Services, Inc
1919 West Fairmont Dr.
Building 8
Tempe, AZ 85282

Midland Funding
Attn: Bankruptcy
PO Box 939069
San Diego, CA 92193

RGS
1700 Jay Ell Dr.
Ste 200
Richardson, TX 75081

MRS
1930 Olney Ave.
Cherry Hill, NJ 08003

State Collection Service Inc
2509 S. Stoughton Rd
Madison, WI 53716

Nationwide Credit
PO Box 14581
Des Moines, IA 50606-3581

Syncb/Toys R Us
Attn: Bankruptcy
PO Box 965060
Orlando, FL 32896

Neil A Andree
1782 County Knoll Lane
Elgin, IL 60123

Target
Target Card Services
Mail Stop NCB-0461
Minneapolis, MN 55440

Northland Group
PO Box 390846
Minneapolis, MN 55439

Transworld Systems
500 Virginia Dr. Suite 514
Ft. Washington, PA 19044

Oak Brook Anesthesiologists
PO Box 7628
Carol Stream, IL 60197

Transworld Systems Inc.
500 Virginia Drive.
Suite 514
Ft. Washington, PA 19034

Phillips & Cohen Associates
ltd
1002 Justison Street
Wilmington, DE 19801-5148

Wells Fargo Home Mortgage
PO Box 10335
Des Moines, IA 50306-0335

Salvador J Lopez, Bar No. 6298522
Robson & Lopez LLC
180 W. Washington
Suite 700
Chicago, IL 60602
(312) 523-2021
Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

In re: Case No.:
Stephanie R Andree SSN: xxx-xx-4571
SSN: _____

Debtor(s)

Numbered Listing of Creditors

Address:

**1782 County Knoll Lane
Elgin, IL 60123**

Chapter: **7**

	Creditor name and mailing address	Category of claim	Amount of claim
1.	Advanced Medical & Wellness 1600 North Randall Rd Suite 100 Elgin, IL 60123 x6005	Unsecured Claim	\$3,007.32
2.	Alltran Financial PO Box 610 Sauk Rapids, MN 56379 xxxx7108	Unsecured Claim	\$0.00
3.	Alltran Financial PO Box 610 Sauk Rapids, MN 56379 xxxx7108	Unsecured Claim	\$0.00
4.	Alltran Financial PO Box 610 Sauk Rapids, MN 56379 xxxx3370	Unsecured Claim	\$0.00
5.	Amex Correspondence PO Box 981540 El Paso, TX 79998 xxxxxxxxxxxx0063	Unsecured Claim	\$742.00
6.	Ashton Center for Surgery 1800 Mcdonough Rd Hoffman Estates, IL 60192 xxx1830	Unsecured Claim	\$2,809.01

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
7.	Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622 xxx8574	Unsecured Claim	\$423.00
8.	Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622 xxx2002	Unsecured Claim	\$318.00
9.	ATG Credit LLC PO Box 14895 Chicago, IL 60614-4895 xxxx6472	Unsecured Claim	\$423.00
10.	Blitt & Gaines PC 661 Glenn Avenue Wheeling, IL 60090 xx-xx-xx4882	Unsecured Claim	\$0.00
11.	CAC Financial 2601 NW Expressway Suite 1000 East Oklahoma City, OK 73112-7236 xxxx2424	Unsecured Claim	\$0.00
12.	Cadence Health 25 North Winfield Rd Winfield, IL 60190 xxx1575	Unsecured Claim	\$264.96
13.	Capital Management Services LP 698 1/2 South Ogden St. Buffalo, NY 14206-2317 xxxxx3765	Unsecured Claim	\$0.00
14.	Capital One Attn: General Correspondence/Bankruptcy PO Box 30285 Salt Lake City, UT 84130 xxxxxxxxxxx7468	Unsecured Claim	\$6,607.00
15.	Cardworks/CW Nexus Attn: Bankruptcy PO Box 9201 Old Bethpage, NY 11804 xxxxxxxxxxx3739	Unsecured Claim	\$3,264.00

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
16.	Chase Card Services Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850 xxxxxxxxxxx1538	Unsecured Claim	\$1,491.00
17.	Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columbus, OH 43220 xxxx5397	Unsecured Claim	\$213.00
18.	Client Services 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047 xxxx2643	Unsecured Claim	\$0.00
19.	Client Services 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047 xxxx9211	Unsecured Claim	\$0.00
20.	Convergent 800 SW 39th St. PO Box 9004 Renton, WA 98057 x-xxxx7778	Unsecured Claim	\$0.00
21.	Discover Financial PO Box 3025 New Albany, OH 43054 xxxxxxxxxxx1519	Unsecured Claim	\$793.00
22.	ERC PO Box 57610 Jacksonville, FL 32241 xxxxx3973	Unsecured Claim	\$0.00
23.	FBCS Services 330 S. Warminster Rd. Suite 353 Hatboro, PA 19040 xxxxx1301	Unsecured Claim	\$0.00
24.	Financial Recovery Services PO Box 385908 Minneapolis, MN 55438-5908 xxT406	Unsecured Claim	\$0.00

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
25.	First National Credit Card/Legacy First National Credit Card PO Box 5097 Sioux Falls, SD 51117 xxxxxxxxxxx7669	Unsecured Claim	\$1,514.00
26.	Firstsource 205 Bryant Woods South Amherst, NY 14228 xxxx4873	Unsecured Claim	\$0.00
27.	Firstsource 205 Bryant Woods South Amherst, NY 14228 xxxx2962	Unsecured Claim	\$0.00
28.	FMA Alliance 12339 Cutten Rd Houston, TX 77066 xxxx7915	Unsecured Claim	\$0.00
29.	Frontline Asset Strategies 2700 Snelling Ave N Ste 250 Roseville, MN 55113 xxxxx1608	Unsecured Claim	\$0.00
30.	GC Services Limited Partnership PO Box 930824 Wixom, MI 48393-0824 xxxxxxxxxxx0785	Unsecured Claim	\$0.00
31.	Global Credit Collections 5440 N. Cumberland Ave. Suite 300 Chicago, IL 60656-1490 xxxx1586	Unsecured Claim	\$0.00
32.	ICS Collection Serv PO Box 1010 Tinley Park, IL 60477-9110 xxxx4819	Unsecured Claim	\$277.49
33.	ICS Collection Serv PO Box 1010 Tinley Park, IL 60477-9110 xxxx7881	Unsecured Claim	\$307.80

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
34.	JH Portfolio Debt Equities 500 Virginia Dr. Suit 514 Ft. Washington, PA 19034 xxxx-xxxx-xxxx-3794	Unsecured Claim	\$2,441.96
35.	Jn Portfolio Debt Equities, LLC Attn: Bankruptcy 5757 Phantom Dr. STE 225 Hazelwood, MO 63042 xxxxxxxx4437	Unsecured Claim	\$3,550.00
36.	Jn Portfolio Debt Equities, LLC Attn: Bankruptcy 5757 Phantom Dr. STE 225 Hazelwood, MO 63042 xxxxxxxx7994	Unsecured Claim	\$1,636.00
37.	Kohls/Capital One Kohls Credit PO Box 3120 Milwaukee, WI 53201 xxxxxxxxxxxx6375	Unsecured Claim	\$513.00
38.	LTD Financial Services 7322 Southwest Freeway Suite 1600 Houston, TX 77074-2053 xxx xxxxx0138	Unsecured Claim	\$0.00
39.	Mercantile 165 Lawrence Bell Drive Suite 100 Williamsville, NY 14221-1900 xxxx3871	Unsecured Claim	\$0.00
40.	Midland Funding Attn: Bankruptcy PO Box 939069 San Diego, CA 92193 xxxxxx3820	Unsecured Claim	\$1,328.00
41.	MRS 1930 Olney Ave. Cherry Hill, NJ 08003 xxx.xxx2674	Unsecured Claim	\$0.00
42.	Nationwide Credit PO Box 14581 Des Moines, IA 50606-3581 xxxxxxx9978	Unsecured Claim	\$0.00

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
43.	Northland Group PO Box 390846 Minneapolis, MN 55439 xxxxx0606	Unsecured Claim	\$0.00
44.	Oak Brook Anesthesiologists PO Box 7628 Carol Stream, IL 60197 xxx1830	Unsecured Claim	\$336.00
45.	Phillips & Cohen Associates Ltd 1002 Justison Street Wilmington, DE 19801-5148 xxxx7426	Unsecured Claim	\$0.00
46.	Portfolio Recovery PO Box 41067 Norfolk, VA 23541 xxxxxxxxxxxxx5134	Unsecured Claim	\$2,470.00
47.	Portfolio Recovery PO Box 41067 Norfolk, VA 23541 xxxxxxxxxxxxx2561	Unsecured Claim	\$1,947.00
48.	Presence Bankruptcy Dept. PO Box 247 Bedford Park, IL 60499 xxxxxxx8679	Unsecured Claim	\$3,066.39
49.	Progressive Financial Services, Inc 1919 West Fairmont Dr. Building 8 Tempe, AZ 85282 xxxxxx7486	Unsecured Claim	\$0.00
50.	RGS 1700 Jay Ell Dr. Ste 200 Richardson, TX 75081 xxxxxx2041	Unsecured Claim	\$0.00
51.	State Collection Service Inc 2509 S. Stoughton Rd Madison, WI 53716 xxxx4449	Unsecured Claim	\$530.00

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
52.	State Collection Service Inc 2509 S. Stoughton Rd Madison, WI 53716 xxxx7638	Unsecured Claim	\$3,429.45
53.	Syncb/Toys R Us Attn: Bankruptcy PO Box 965060 Orlando, FL 32896 xxxxxxxxxxxx5848	Unsecured Claim	\$2,708.00
54.	Target Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440 xxxxxxxxxxxx4515	Unsecured Claim	\$572.00
55.	Transworld Systems 500 Virginia Dr. Suite 514 Ft. Washington, PA 19044 xxxx9494	Unsecured Claim	\$363.16
56.	Transworld Systems Inc. 500 Virginia Drive. Suite 514 Ft. Washington, PA 19034 xxxx1888	Unsecured Claim	\$0.00
57.	Transworld Systems Inc. 500 Virginia Drive. Suite 514 Ft. Washington, PA 19034 x2850	Unsecured Claim	\$60.00
58.	Wells Fargo Home Mortgage PO Box 10335 Des Moines, IA 50306-0335	Secured Claim	\$165,286.43

in re: **Stephanie R Andree**

Debtor

Case No. (if known)

(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **Stephanie R Andree**,
named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*,
consisting of 8 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

Debtor: /s/ Stephanie R Andree Date: 5/9/2018
Stephanie R Andree